

RECEIVED

DHSS Breath Alcohol Program

By Carol Day at 3:41 pm, Nov 10, 2009



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

Morgan Co. SO, Versailles

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 204158	DATE OF INSPECTION 11/10/2009
LOCATION OF INSTRUMENT (STREET AND CITY) 2920 North Shamrock Road, Jefferson City	TIME OF INSPECTION 13:01

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ **DIAGNOSTIC CHECK (PRINTOUT ATTACHED)**

☒ **COMPUTER**

☒ **DETECTOR**

☒ **PROGRAM**

☒ **FILTERS**

☒ **HEATERS SAMPLE CHAMBER** +50°C

☒ **QUARTZ STANDARD**

☒ **FLOW DETECTOR**

☒ **CALIBRATION**

☒ **PUMP HIGH SPEED**

☒ **PRINTER**

☒ **INDICATOR LIGHTS**

☒ **TIME AND DATE**

☒ **SIMULATOR TEMPERATURE (34 °C ± 0.2°C) +33.98°C**

☒ **CALIBRATION CHECK -**

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☐ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☒ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 .039	TEST 2 .040	TEST 3 .040
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☒ **PERFORM R.F.I. TEST (PRINTOUT ATTACHED)**

☒ **NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)**

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(Over .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

Jumpered defective trace on power supply PC board supplying +5VDC analog supply for proper continuity. Confirmed proper voltage settings on power

supply PC board, as well as voltages to sample chamber control PC board (flow rate voltage adjustments made).

Guth Laboratories, lot #09010, expiring 01/06/2010

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Dewayne D. Carver
TYPE II PERMIT NUMBER EXPIRATION DATE 920208 09/07/2011	TELEPHONE NUMBER (573) 751-4722

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 09001

EXPIRATION DATE: April 22, 2011 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:


RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 09001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1214 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is April 23, 2009.
The expiration date for this lot number is April 22, 2011
at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marking, Inc.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204158

11/10/09
13:01

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM (04-07-2009): OKAY
HEATERS
SAMPLE CHAMBER: 50C
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

! "#\$%&'()*+,-./0123456789:;<=>?@ABCDEF
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefgijklmno
pqrstuvwxyz{|}~

OPERATOR SIGNATURE

George Carver

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204158
11/10/09

TESTING OFFICER:

CARVER/DEWAYNE/D

OFFICER I.D.: C41

PERMIT NUMBER: 920208

EXPIRATION DATE: 09/07/11

MISCELLANEOUS DATA:

.04 VAPOR CALIBRATION CHECK

GUTH LABS LOT 09010 EXP 1/6/2010

--- SUPERVISOR MODE ---

BLANK TEST	.000	13:04
INTERNAL STANDARD	VERIFIED	13:04
EXTERNAL STANDARD	.039	13:05
BLANK TEST	.000	13:05
EXTERNAL STANDARD	.040	13:06
BLANK TEST	.000	13:07
EXTERNAL STANDARD	.040	13:07
BLANK TEST	.000	13:08

N = 3

SIM. = .1

AVG. = .0396

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204158
11/10/09

ARREST TIME: 00:00

SUBJECT NAME:

X

DOB: 01/01/01

SEX: M

STATE/D.L.: XX/X

ARRESTING OFFICER:

X

OFFICER I.D.: X

TESTING OFFICER:

CARVER/DEWAYNE/D

OFFICER I.D.: C41

PERMIT NUMBER: 929208

EXPIRATION DATE: 09/07/11

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	13:09
INTERNAL STANDARD	VERIFIED	13:09
SUBJECT SAMPLE	.000	13:10
RADIO INTERFERENCE		

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



DEWAYNE D CARVER

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/07/09

Number 920208

Expires 09/07/2011

MO 580-0771 (7-88)

Interim Director

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)